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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number: 147649.01 |
| Application Number : 09/607,195 | | Filed : 06/28/2000 |
| For : Method For Controlling Access To A Network By A Wireless Client | | |
| Art Unit : 2135 | Examiner : B.W. Dada | |

This is a request under the provisions of 37 CFR 1. 136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

| | <u>Fee</u> | <u>Small Entity Fee</u> | |
|--|-------------------|--------------------------------|------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$55 | \$ _____ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$460 | \$215 | \$ _____ |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1050 | \$490 | \$ 1050.00 |
| <input type="checkbox"/> Four months (37 CFR 1. 17(a)(4)) | \$1590 | \$765 | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1040 | \$ _____ |

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account Number 50-0463 . I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ **attorney or agent of record. Registration Number 45,466**

☐ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____.

_____/Nathan M. Rau/

Signature

Nathan M. Rau

Typed or printed name

March 14, 2008

Date

(425) 706-6882

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted